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IMPROVING THE EFFECTIVENESS OF PUBLIC
MANAGERS : CAN MBO HELP?

by

B L Mittal

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IMPROVING THE EFFECTIVENESS OF PUBLIC MANAGERS: CAN MBO HELP?

by

B L Mittal

1. Introduction

The purpose of this article is to review some aspects of managerial process as observed in one specific governmental programme. I do so with a view to identify those features which seem to detract from the effectiveness of programme managers. I would then outline some thoughts on whether Management by Objectives (MBO)--a much talked about management concept, particularly in industry--can lead to improvement of this managerial process, and would discuss how public programme managers may benefit from employing MBO.

To be sure, government programmes have been much researched. But most such research studies have had a public administration focus. These have given valuable insights into the nature of bureaucracy and its influence on performance, and have thrown up such suggestions¹ as

- i) There is urgent need to cut red-tape
- ii) Organisational communication needs to be improved, in the sense that employees need to be more open to each other.
- iii) There is need to rid oneself of "rules and procedures" and acquire orientation to results, change and innovation.
- iv) There is need to secure people's participation, particularly, in developmental programmes.

¹ See, for example, V A Pai Panendiker and S S Kohli ~~reagar~~ ^{reagar}; Bureaucracy and Development Administration, Centre for policy research, New Delhi, July 76.

Useful as these suggestions are, these merely convey, vaguely, that there is need for a public administrator to change his way of looking at things. Beyond this, these do not tell him what exactly can he do to improve his organisation's performance. This is because administrative behaviour is not studied in terms of elements of operational managerial process—that is goal-setting, staff commitment, monitoring and evaluation. This paper is an attempt in this direction.

In analysing the administrative behaviour, we shall exclude the policy-formulation, resource allocation and strategic planning functions of top management, and focus attention on 'executive function' of managing the programme implementation. Also, we are concerned here not with management of field level workers, but with management of field supervisor by his boss, and of the latter by latter's boss and so on. We are concerned with transaction that takes place between managers at two consecutive levels, because after all it is the nature and quality of this transaction which constitutes 'executive-function'. How a top administrator transacts with his subordinate administrator, would influence the transaction of subordinate manager with latter's subordinate. The influence would percolate to the operating levels and would ultimately determine efficiency of programme implementation.

The context and basis of this article is a study of family planning programme organisation in one state of India, (although some illustrations from another state have also been included). I believe, however, that the managerial process is similar in FP programmes in other states and more importantly, that it is representative of all governmental programmes- **social** programmes such as health, education, welfare as well as socio-economic programmes such as industrialisation, rural economic development, etc.

MBO has been employed with varying degrees of satisfaction in some private sector organisations in India. Less is known about its use in Indian public sector organisations. In U.S., Federal department of health, education and welfare began using MBO in 1971 and, according to one documentation² available, benefited from it. In presenting a proposal for applying MBO to Indian governmental programmes, this article is an exercise unfamiliar to existing Indian literature. We would, therefore, urge public-programme administrators both in FP organisation and outside (who we hope would not be driven away by FP context of the article), to be generous in sharing their comments on my diagnosis of deficiencies in the managerial process and on applicability of MBO as remedy, in their particular situations.

² Brady R.H. : MBO goes to work in Public sector, Harvard Business review Vol 51 No. 2, March-April 73, p 65-74.

2. Management process in a State FP programme

2.1 Organisation

At the state level, while the Secretary to the department and the director of the medical and health services participate in policy formulation and in major reviews, the responsibility of operational management of state programme lies with the state family planning bureau. The state bureau is headed by a state family planning officer, and is staffed by several functional officers: Assistant Director(Programme), Assistant Director (Mass Communication), Assistant Director(MCH), Assistant Director(training), Demographer and Evaluation Officer and Administrative Officer. At the district level, the district family planning bureau is responsible for programme. The bureau is headed by Chief Medical Officer whose responsibilities also include other health programmes. The officer directly responsible for the FP programme is the District FP Officer who reports to Chief Medical Officer. The district family planning officer is assisted by extension supervisors, a mass-communication officer and a statistician. At the block level, the medical officer of the primary health centre is the overall in charge of the programme. He has a team of about five supervisors and about 30 to 40 field workers.

2.2 Operational management process

2.2 1. Goal setting: Programme goals are defined in terms of number of acceptors to be recruited for individual family planning methods. The goals (called 'targets') for the state are obtained from the government of India. These are then allocated over the districts by the state bureau. While the state bureau claims to take into account such

district characteristics as literacy, socio-economic development and past performance, district officers are not involved in setting these goals. Similarly, district officers further allocate the goals over primary health centres (PHCs) without involving the PHC officers.

2.2 2. Plans: Generally at the beginning of the year, state officials take a meeting of all the district officers where the agenda is stated to be "a review of the previous year's performance and programme and the formulation of strategy and plans for the current year". Targets are either allocated in these meetings or communicated in earlier circulars. In these meetings, which are crowded, the state officers read out the "strategy" prepared by them and the discussion that follows is fleeting /they might have on the strategy read out.

The strategy that was read out in one state in one particular year had, in addition to many detailed guidelines as well as do's and do nots, following important points:

- i) PHC doctors be made responsible for PHC targets
- ii) Fix target for every para medical or health worker. Also fix targets on hospitals.
- iii) Promote FP adoption after medical termination of pregnancy
- iv) Make intensive efforts right from the beginning

/ and invariably confined to district officers clarifying any doubts

- v) Involve other departments. Even so, an attempt be made so that the targets set for are accomplished by workers of our department alone.
- vi) Involve tubectomy acceptors as motivators for tubectomy camps
- vii) Every doctor be trained in sterilisation
- viii) All Chief Medical Officers(CMOs) and Joint Directors be trained in may in management topics.
- ix) They would subsequently organise training for PHC officers
 - x) During the course of such training itself, a work plan will be made for districts and PHCs. The plan will show breakup of monthly expectations on each item and will provide for adequate supervision.
 - xi) Make sterilisation services available at the PHC and on every day.
 - xii) State level officers(including secretaries) to whom divisions were allocated last year, will continue to be associated with those divisions.
- xiii) Organise medium size camps at the PHC itself.
- xiv) Special drives would be held in September, October, December and in February and March. The CMOs can vary the months of first three drives.
- xv) CMOs and SFPO will ensure all vehicles repaired by June, 30.
- xvi) Evaluation: Each PHC medical officer shall analyse worker-wise achievement and produce this report in staff meetings to CMO. The CMO will review and send evaluation report to state in narrative form.
- xvii) Nirodh promotion
 - a) Insist that every health worker registers regular users
 - b) Establish distribution centres in rural areas
 - c) Assign villages to workers
 - d) Select and saturate one PHC in each Tahsil.

The content of this "strategy" can be described as: (a) New (useful) prescriptions on toning up services, (b) prescribing certain ideas which may help promotion, eg. Nirodh promotion, (c) suggestions that management and supervisory processes be streamlined, eg., prescriptions on evaluation procedure, (d) too general in some parts, eg., 'involve departments', 'make efforts right from the beginning', etc.

Useful as these are, it should be noted that these are essentially broad ideas. They don't tell a field manager exactly how would targets of PHCs or districts be achieved. For example, will undertaking of 4 prescribed actions on Nirodh promotion, achieve Nirodh target of a particular district, or by following all points of the strategy would a district achieve its sterilisation target? Obviously the individual field units responsible for achieving the goals should themselves undertake detailed operational plans for goals achievement. While the state 'prescription' also asked all districts and PHCs that they prepare the work plans, this directive is not followed up. With the result that districts and PHCs do not prepare any work plans and consequently have no opportunity of discussing their plans with their superior officers.

2.3 Performance review and monitoring

For performance review and monitoring, essentially, three mechanisms are employed: First, each month's performance reports are sent to higher levels. These reports are compiled and then circulated among all operating units. Once in a while, some officer looks at these more closely and singles out districts which are doing very poorly and

then some letters of reprimand are sent down. Second, every quarter or some times even every month, meetings of all district managers are held at the state level. (Similarly PHC Officers' meetings are held at the district level). In these meetings, some attempt is made to review the performance. Third, Head office managers visit field areas for inspection and during these inspections discover some aspects of what is happening in the field and discuss the same with the concerned field officers.

2.3 1 Inspections

Inspection is believed to be a chief method of motivating and monitoring performance. One state level officer was of the view that "performance of individual districts or PHCs depended to a great extent on the supervision, guidance, monitoring, official interest etc. of the local officer". When asked as to how as a state level administrator could he monitor the supervisory efforts of local officers, he said "if I could send teams of my officers to field for on-the-spot investigation that would be the best way. However, most of the officers were heavily loaded with headquarters work ... and I myself cannot spend more than 4/5 days in the field". His diary entries indicated that he spent roughly about 30 to 40 percent of his time in the field. On being asked as to what he did during a field visit, he said:

On the first day, in the forenoon, I visit district hospital or whatever hospital there is. There I look at medical facilities, medicines, service quality, etc. In the afternoon, I hold about

2 to 2½ hour long meeting with district officers, wherein, for about one hour I talk and then for the next one hour or so there is discussion. In the first one hour of my talk, I give them my ideas and guidance ... On the second day I visit one of the Tahsil level dispensaries and one or two PHCs - at the PHC, I look at everything, medicines, instruments, diaries, records, etc. If there is a camp, I also attend that ... I would very much like to visit one or two sub centres also, but I generally cannot do so for lack of time".

On being asked why does he consider it necessary to visit PHCs at all, rather than confining himself to discussing performance with his immediate subordinate district officers, he mentioned the following reasons:

1. Incompetence of some district officers necessitates checking on their subordinates.
2. My PHC visits provide a psychological satisfaction to PHC staff.
3. Our neck is in everything and hence we need to remain in direct touch with what is happening in the field. Inspecting a few PHCs gives me a sense of security, to answer queries from above.
4. Such visits are essential to gather first hand impressions and data about PHC doctors, so that we may take necessary punishment action when need be.

These inspection visits invariably generate an inspection report which is sent to field officers for compliance. Extracts from the report of one of the inspections by a state level officer is given in Table-1. A content analysis of this and other inspection reports seen, is presented in Table-2. It shows that the task accomplished

during inspections is largely informational, which could be better accomplished through devising appropriate information systems. For example, the officer discovered in his inspection and bothered himself about, the incidental absence that day of one ANM (a six levels removed employee of a category in which there are 8 thousand in the state)! Could not one of his subordinate, officers, dealing with personnel matters, handle affairs such as this, by having district managers send an explanation report of the employees who absent themselves without permission for more than say X days?

The discussion that takes place during inspection visits is largely on the things discovered during inspections plus, as stated by the SFPO, "to discuss the ideas I have". (emphasis added). These discussions are not utilised for review of the programme performance or to discuss the ideas of the field officers or to discuss any problems that the field officers might face. Instead, the discussion pertains to such lapses in activities and operations (and not in performance or results) as might have been noted by the inspectors during their inspections.

The obsession with inspection is amazing. The highest officer of the state would like to inspect the sub centres also if time permitted. Again, when asked what was his job, a Joint Director of the division said: He is "an inspecting authority for all programmes and inspection is my job".

2.3 2 Performance review meetings

Following is a sample description of how performance was reviewed in one state, on one occasion

The presiding officer -an officer from Secretariat-aided by State Family Planning Officer, carried out review for about one hour. The process consisted of each district officer getting up one by one and giving final figures for the month of April. The Chairman and SFPO would record these figures on their sheets. The conversation with two district officers went as below:

Chairman You achieved 11,251 sterilisations out of a target of 14,330 last year. This year, the target is only 8,000. So this year you should be able to achieve this reduced target.

Officer Nods in the affirmative.

Chairman Alright

Officer (Sits down)

The officer of another district reported his April performance.

Chairman Only 36 out of 5467 Very poor. Really very poor. Last year also your performance was very poor. You must achieve your target this year.

Dist.Officer I shall try my level best Sir.

Chairman Pardon me?

Dist.Officer (Raising his voice) I will try my level best Sir.

Chairman Okay

Dist.Officer (Sits down)

This is what passes under the name of performance review.

What do district officers feel about such "planning and performance review" meetings? Here is what one district officer states:

"In fact state level meetings are monologues delivered by state officials. The meetings are packed with agenda ... There were 10 officers of the directorate who addressed us each talking for half-an-hour ... No one is encouraged to raise problems there".

2.3 3 The Letters

Now about motivating performance through 'letters', which as we mentioned, is the third mechanism. In one instance, in 1976, the Dy. Secretary sent a letter to Director of Health Services (DHS) to SFPO and drawing their attention to very poor performance in one particular district. The letter argued:

"When the performance of our department employees is not good, and if they show no interest towards the programme, then it is natural that its effect will be felt on the employees of other department".

It directed the DHS to "please issue strict directive and order to district officer that he should take effective steps for completion of the target". In response, SFPO wrote a letter to district programme officer, wherein he reproduced the argument about "other department, taking inspirations from this department" and directed district officer to (1) "issue warning letter to PHC staff, (2) inform in writing to deputy district Programme Officers that "it would be their responsibility to complete the targets and that that based on their achievement, an entry would be made by you in their annual report".

The DHS also write a letter to district programme officer in which he directed that "please direct deputy district programme officers to make extensive tours in their areas and in order to increase the morale of the staff, also make the night halts".

Such letters which take field managers directly to task and command them to take some actions at their level, are however not very frequent. More frequent are the letters, threatening the workers with dire consequences on failure to achieve individual targets, emanating from all levels and dutifully reproduced for transmission downwards.

3. AN APPRAISAL OF THE PRESENT MANAGEMENT PROCESS

What is wrong with the management process described in the foregoing? What detracts from its effectiveness? In this section we shall critically review the management process to answer these questions.

3.1 Commitment to goals

The unilateral determination of the targets at one level higher than the level which is responsible to achieve the goals results into goals being set and accepted without any real commitment towards these. Mostly the operating managers perceive these goals to be beyond achievement. This expectation affects the results because expectations are often self-fulfilling prophecies. It is well known that achievement seldom comes as a windfall. Individual as well as organisations end up achieving only such levels of goals as they expect to achieve and no more. The target, when assigned as official-chore, merely remain a figure on paper and officers do not expect these as "meant to be achieved".

They perceive that their officers also had to allocate this figure because they had no other option, but that in fact they (their officers) might themselves not be expecting subordinate officers to achieve these goals.

A further harm accrues from the fact that even the expected level, which may be lower than the set goals, are not consciously debated and finalised. A notional figure of what may be likely to be achieved remains somewhere at the back of mind and even this figure gets subsequently revised downwards, as the progress towards goal achievement turns out to be slow.

The participation that some target-assigning officers believe to be taking place is of a make-believe variety. Often, meek nodding by the subordinate officers is taken as acceptance.

3.2 Implementation for results

No operational plans are made, since the same are not required to be made, consequently there is no knowledge among the managers and their superiors as to what level of achievements will accrue and in order for these to accrue what actions will be undertaken. The results accrue, therefore, due to the "running of the mill", which acquires short-lived accelerations whenever some concern is shown by higher level managers, but there is no deliberate and planned effort to reach a pre-determined goal level.

During the course of the operating period, no serious demands are made by managers that their subordinate managers achieve the results. This may sound strange in a system where pressure for target achievement is high. Apparently, state level managers keep continuously reminding district managers, who in turn, do the same to their subordinate PHC managers, about the need to achieve targets and some times serious threats and exhortations are also delivered. The result of this pressure is certainly felt by field workers (but never by any field manager) who are indeed hard pressed to achieve their individual targets. Anxious to achieve such results as would make their survival possible, field workers do lot of running about, some how catch some cases from here and there, thus managing to recruit enough cases for survival, and in some instances, where they fail to do so they suffer threats or sometimes actual incidence of suspension, salary cuts and infrequently even retrenchments. However, no manager at PHC or district level feels a real concern for achieving the goals of his unit. At one time in one state, PHC doctors were also given their individual targets and it was natural that they considered achievement of their individual targets to be their only concern and feel unconcerned about PHC goals. Even otherwise managers know that while they may receive, as indeed they do, some admonitions from higher authorities, seldom would their careers and lives in organisation be seriously affected by their non achievement unlike what happens to programme workers.

In one primary health centre where a consultant-researcher team (of which author was a member) was attempting to improve performance, after lot of energies had been spent in preparing action plans for improving achievement—and the planning process had involved the PHC doctors in full measure—they discovered that even though PHC doctors agreed and seemed truly convinced that the work-plan would result into higher achievement, they were not inclined to put the plan into operation since it required some hard work. It became plain that indeed they have no real desire to improve the achievement. One doctor said "what will I gain by putting in so much effort?" and this in the face of the fact that in every monthly meeting at the district, the CMD would exhort and admonish them to achieve better results. The whole exercise—monthly meetings that is—was perceived to be a mere bureaucratic ritual. Why do such repeated reminders, threats and exhortations end up being bureaucratic rituals and fail to elicit substantially raised efforts from the operating managers? This is again because just as at the goal setting stage, so also at the performance review stage, the communication is one way. At no stage are operating managers required to state as to what they would achieve and what would they do to achieve the same

Prodominant mechanism for monitoring is the inspection. It is interesting to note the state family planning officers' reasons for inspection. One of the reasons is that a subordinate/for the incompetent operating manager. The subordinate's incompetence may or may not be real. False perception about subordinate-competence is a classic barrier to delegation and indeed to subordinates' achievement. But even if the perception is right, can assumption/^{of}some of subordinates' responsibilities be the solution?

Another reason cited is to keep himself informed of field details since "his neck is in everything". This fear of higher officers requiring some information at short notice and expecting the subordinate to be aware of required detail is rooted in a special characteristic of the governmental system, in general. Questions are raised in Parliament and Assemblies pertaining to some activity at the field level and top officials feel insecure if they are unable to answer such questions impromptu. This trait on the part of manager's boss is another classic barrier to delegation. This barrier must be overcome. On one hand, politicians (Ministers, MPs and MLAs) and policy-making executives need to appreciate that they should exercise only strategic control over government programmes and be concerned only with the overall results rather than bother themselves with minute field activities (unless, of course some events may be of larger public implications). On the other hand, programme managers need to realise that effective

/manager is incompetent. In other words, he himself is substituting

management, makes it imperative for them to influence their superiors' expectations from them about knowing everything and should acquire the guts to say "I am afraid I would not know about it, but I would find out and let you know". Not very comfortable thing to do, we know, but it must be begun gradually, for such is the demand of managerial task.

Not all inspection is, however, undertaken with a view to be able to answer random questions of superior officers. One of the reasons could be that headquarter officers perceive it a good thing to visit the field so that all concerned are impressed that the "boss does not keep himself confined to the air conditioned office". In some cases, required number of field tours are even specified as part of the job description and officers undertake inspection tours merely to fulfill these quotas. But most importantly why so many inspections are undertaken is perhaps due to a genuine belief held by many managers that such inspections tone up the field activities and help improve results. While some benefits would surely accrue, they do not justify the time spent and the effective monitoring does not result. Many officials mistake "inspection" for "management" and the real managerial tasks of goal setting, motivating committed efforts, performance review and monitoring get by passed. Administrators believe that performance review and monitoring do get accomplished through inspections but we have noted, based on our field observations and on the content analysis of inspection reports, that this at most is superficial.

What about "the letters?" How effective are these, in motivating higher effort? In the case we cited earlier, the Dy. Secretary and following him the two State officials, merely wrote one letter each and district-file contained no evidence of any further follow up. One of the state officials with whom these letters were discussed about five months after they were written, could not off-hand tell whether performance of the district had improved. Could it be (one may somewhat unkindly hypothesise) that some of these letters get written merely "for the benefit of the file!"? What else can otherwise explain that "other department workers taking inspiration from FP workers" stuff, when it was well known and well accepted that other departmental workers were better equipped to recruit more cases than helpless FP workers. What credibility do such arguments have in the eyes of those who receive such communication. Furthermore, why tell a field manager what he should do? Let us accept, for a moment that the letters were written out of genuine concern felt by state officials and that, therefore, they did some hard thinking on remedial action. But should they be the ones doing this thinking? By seeking to prescribe the improvement action, the state level officers have taken up upon themselves the responsibility which rightly belongs to the field managers and which the former should demand of the later. The effect of present practice would be that the field manager would go ahead and implement these prescriptions and that is the end of his responsibility. No more would he be worried about improving the achievement. No opportunity was given to him to ask the questions

"what is it that I should do? How can I improve my achievement?" It is natural that the prescribed action would be implemented without much impact on the achievement.

3.3 Impact on achievement

What does this management process, saddled with all detracting features discussed in the foregoing, do to the whole task-organisation? In essence, the effects are following:

- i) The achievement would be low since there is no commitment to goals, and also since no work plans seeking to consciously influence the outcomes are made.
- ii) since there is no commitment to goals and there is no meaningful destination to reach, it would seem that people go on doing things somewhat mechanistically and since they have nothing to look forward to not only in terms of their career prospects but also in terms of performance results, it must seriously be detracting from job satisfactions of people in organisation.
- iii) Thirdly, the managerial tasks get to be usurped by higher and higher levels so that lower level managers progressively carry less and less of the managerial responsibilities and are reduced to para supervisory and some times completely non managerial roles confined to carrying out and passing downwards the orders and instructions received from above. In other words, there is

undue centralisation in management decision making. These would have two implications: (a) Since the managerial tasks get to be done at higher and higher levels, further and further removed from the operating levels, these would be done only superficially both because the number of operating units for which the managerial tasks would be done by an individual higher level officer would be large (the state doing managerial task in respect of say 50 districts) and also because the top level officers are not cognisant of field conditions. (b) More serious, the managerial tasks would be ineffectively discharged simply because the operating managers responsible for achieving the results are different from those who make the management decision. It is known that a plan achieves results not only because the contents of the plan are good, but also because the plan is prepared by someone who would be able to directly influence the activities and operations. This does not happen under present decision making practices.

4. THE MBO

As solution to these problems, we suggest the concept of management by objectives. The definition and central content of management by objectives process is set out in inset-table 3. In essence, the process would involve the following:

- 1) The district goals will be determined by a consultation and negotiation process between district officers and state officers. The district officers would, in an individual face to face meeting with the state officer, commit to achieve the agreed upon goals.
- 2) State level officer would require district level officer to prepare plan which would in fact form the basis of discussion preceding the goal finalisation. The plan would be primarily formulated by district level officer and at the discussion stage, state officer would discuss the chances of such a plan achieving the desired results and will advise on improving the plan.
- 3) Due to participation both in the goal setting and in preparation of a plan, there would result a commitment and the district level officer (who would undertake similar process with his PHC officer) would go to implement the plan with enthusiasm.
- 4) What results are to be looked at in evaluating performance would be defined. If some activities also need to be appraised this would be identified. Information systems would then get designed to measure these results and the specific activities. There would be no need for inspection tours. Or, at most, inspection tours would

be undertaken with the limited purpose of "wetting one's feet" which would require much less time and save unnecessary spending of energies.

At the pre-decided periods, the district officer and state officer would sit down in an individual face to face performance review session where the district officer would state his reasons for performance variance and would also assume the primary responsibility of identifying what improvement actions he would take. While this process would be aided by state level officer, the actual mental wrestling to answer the question "What is it that I should do to improve my performance?" would be done by the district officer and not by his superior officer.

- (5) Returning from such performance review and improvement action identification session, the district officer would undertake all that is necessary to improve his performance and thus the control would be self-control rather than one imposed from above.

An identical process would occur between district officer and his subordinate block officer.

Some quick objections to the feasibility of MBO in government organisations promptly come to mind. These are: (1) at each level the targets are received from a higher level and the manager of that level has no discretion in allocating these targets. Therefore, negotiation with subordinates on goals would be infeasible. (ii) In industry, the mechanisms for reward or punishment for performance of managers are ample. In the governmental organisations, however, no such mechanisms are available and in that circumstance, the MBO would lose its effect. (iii) Bureaucratic nature of governmental organisation makes delegation and decentralisation impossible.

To us, these objections seem to be tenuous. We have already argued that the target figures set in the present system are perceived by all levels as mere paper figures. Generally both the superior and the subordinate managers expect that the actual achievement would be different. If that is so, then by not discussing the goals are we not just deceiving ourselves? If a state receives a target from centre, of say one lakh acceptors and if through a process of consultation with the districts it figures out that the feasible goal for the state would be only say 70 thousand acceptors, it can tell so to the centre. This would only help the programme. But assume, for a moment, that the possibility of given targets does not exist. One could still accept that target but merely on paper as indeed one does at present, but could carry out, at one's own level, the process of involving subordinates in setting their goals and allowing the sum total of goals of the subordinate units to be lesser than the goal received from above. This process can be adopted at any level. The question is who would take the initiative?

It may even be possible through this process, to arrive at higher level of goals than is otherwise there in the minds of participants. Some times it may so happen that, say a state officer is convinced about the feasibility of, say, 12 thousand acceptors as the goal of one district. The district officer, on the other hand, may believe that only 6 thousand would be achievable. Now through sharing of his expectations and the factors that underlie those expectations the state officer could convince the district officer about the feasibility of achieving a higher than 6 thousand level of acceptors. Finally they may agree on say 9 thousand acceptors. This

would be far better than the district officer meekly accepting 12 thousand and in his mind harbouring an expectation of 6 thousand only. On the other hand, if district officer continues to consider only six thousand as feasible, this would not leave state officer under any false impression about how much would be achieved. It must be recalled that it is operating managers' expectation which most influence the actual achievement.

Now about "reward and punishment" mechanism. We have observed earlier that the present mechanisms of trying to improve subordinates performance is through threats and administrative fiat. However, both superior and subordinate managers know that it would be difficult to carry out such threats. In the past, whenever some workers were suspended or retrenched or their salaries temporarily stopped.

There were serious protests and after much deliberations and loss of goodwill the actions were reverted. Do such instances or the threats which cannot be fulfilled, not reduce the credibility of superiors in the eyes of workers and operating managers? As regards punishments to officers for poor performance, none is thinkable. When the system does not allow any external controls, is not this the reason why organisation should rely more and more on self control by individuals, which indeed is the cornerstone of MBO process?

Some times, the bureaucratic nature of the government is said to be a factor which leads to centralisation and the government structures are considered to make decentralisation difficult. While some of the centralisation that we witness may no doubt be due to the way present organisations are structured, but some of the centralisation is not bound by the structural or the bureaucratic nature of the organisation. Consider, for instance, the fact that there is nothing in the government rules which require that the state officer (SFPO or DMHS) prescribes the action that district officer (CMO) should take in order to improve latter's achievement. There is nothing also in the government rules that would come in the way of face to face thorough and business-like performance planning and review sessions between boss and subordinate where the boss demands that subordinate achieve the goals to which he has agreed.

It must now be appreciated that MBO is not a system that may be implemented as a piecemeal innovation. In stead, it is simply an operational management process, a way to effectively discharge the executive functions, a more logical and a more rewarding way of thinking about the job of management.

In its essence the job of managing consists of following elements:

1. Decide/accept goals
2. Prepare plans for goal achievement
3. Organise the steer implementation
4. Review performance:
 - a) compare achievements with goals.
 - b) diagnose causes of variances
 - c) identify improvement action.

Repeat above cycle.

This job remains same whether one uses MBO, or not. It is the style, the manner of carrying out this job that differs. One useful way of understanding the style is to understand how managerial tasks are shared between two vertically adjacent levels of managements, i.e. such as between a Head Office Manager and field managers. In Tables 4 and 5, we have presented such a scheme for current managerial style in government programme organisation and to contrast with it, for the MBO process. The tables are self-explanatory and convey in unmistakable terms, the distinctions of MBO over the generally prevalent style.

Such MBO concepts have been widely applied with much advantage in the industry. There, applying MBO has become a sophisticated art often involving an outside MBO consultant and full time efforts of some internal MBO advisor. However, we believe that there can be levels of sophistication and that at the very least, public managers, once aware of the content and benefits of MBO process, can on their own make improvements in their managerial styles and may slowly approach towards fuller MBO.

Public programme managers would do well to explore whether or not and how they may employ MBO in discharging their responsibility and what rewards await them?

Table - 1

EXTRACTS FROM INSPECTION REPORT OF DR. K. M. DHARAM*, JOINT DIRECTOR
(Inspection Date : 21-5-76.)

WOMEN'S HOSPITAL, KASHIRPUR

1. Lady doctor Srimati Sinha was not present. District programme officer told me that she was gone for Tubectomy training. The training ended on 19-5-76. She should have returned by now.
2. 4th class staff was present. The hospital, is in a demoted building which is in bad condition and which causes problems for work.
6. Outdoor patients' slip is not marked by "2 or 3 children" stamp. Therefore district officer should arrange for one such stamp.
7. Dr. Sinha, is not taking interest in family planning work. Therefore, district officer should take necessary action.

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8. Dr. Verma (2nd MO) was absent without information eventhough this was his clinic day. District officer should seek explanation and send to the undersigned.
9. At the PHC a reception room has been organised in which charts and posters are displayed. In this room some FP and other programmes literature may also be kept for distribution.
10. Inspected PHC stores which were alright.

SUB CENTRE, PATUZA

13. Inspected the subcentre at 11 AM. At that time the Health Visitor was inserting loops. Only 7 loops were inserted till 12 O' clock.
14. The ANM is suffering from Faliz and is not able to do her work properly. District officer should take appropriate action.
15. Due to the absence of Dr. Verma (2nd MO), Dr. F. Khan could come to sub centre only at 12 O'clock. There was no chart etc. at the sub centre and in this connection CMD should issue appropriate orders.
16. Saw the stock register. There was no verification by MO Incharge of PHC which he should do at least once a year.
17. The list of deliveries by midwife was not available at the sub-centre. This information may be recorded in one column in the Birth register. In this connection midwife has been given oral orders.

* All names are Fictitious.

Table 2Content Analysis of Inspection Reports (Outline only)

The inspection reports (as given in Table 1) indicates that officials during their inspection tours (a) note/discover and (b) ask relevant ~~functionaries~~ to take corrective action, about the things such as the following:

i) Personnel irregularities

Examples: absence of lady doctor ; an ANM suffering from Faliz; Technical deficiencies in staff, etc.

ii) Physical condition of facilities:

Examples: Building, equipment, supplies, etc.

iii) Sample activity levels:

Examples: Outdoor/Indoor patients present at that moment; number of loops inserted on that day.

iv) Routine implementation lapses:

Examples: Charts not displayed; OPD slips not stamped, list of midwives not maintained, etc.

v) Routine supervisory duty lapses

Examples: Attendance register not signed by medical officer, stock register not verified.

vi) Maintenance of records

Table 3MANAGEMENT BY OBJECTIVES

Management by objectives or management by results (the terms are used interchangeably) is a particular way of thinking about the job of managing. It is a process that takes place between the manager of unit and his boss. It helps the boss manage the subordinate (manager of a unit) and helps subordinate to manage his unit's operations better.

In simplest outline it consists of following three stages:

- 1) The subordinate and boss agree upon specific objectives/ results to be accomplished by the subordinate.
- 2) The subordinate goes to work to achieve the results.
- 3) At predecided review times, subordinate and boss appraise performance against results/objectives etc.

Sources:

- 1) Arthur C. Beck Jr. & Ellis D. Hillmar, "A Practical Approach to Organisation Development Through MBO-Selected Readings", Addison-Wesley Publishing Co., Reading, Mass, Menlo Park, California (1972)
- 2) Dale D. McConkey, "How to Manage by Results", American Management Association, New York (1965)
- 3) George L. Morrissey, "Management by Objectives and Results", Addison-Wesley Publishing Company, Reading, Mass, Menlo Park, California (1970)
- 4) Edward C. Schloh, "Management by Results: The Dynamics of Profitable Management", McGraw Hill Book Co., Inc., New York, 1961.
- 5) J.V. Fort, "Dynamic Sales Leadership", The Dartnell Corporation, 4660, Ravenswood Ave., Chicago, Illinois 40640 (1967).

Table 4

Sharing of managerial tasks
The present style

<u>Head Office Manager (HOM)</u>	<u>Field Manager (FM)</u>
<p>1. <u>Unilaterally determines goals</u> (Fil's acceptance not cared for; FM's silence/no overt opposition/'meek nodding' is taken as acceptance/commitment).</p> <p>2. a) Prepares broad plans b) Does not demand detailed plans from FM.</p> <p>3. <u>Closely watches (inspects) implementation.</u></p> <p>4. Causes of variance not identified.</p> <p>- Unilaterally specifies improvement, action or issues decrees for reducing negative variance.</p>	<p>1. Passes on, downwards, goals which he himself has not "accepted".</p> <p>2. Has no plans/very sketchy plans. But seeks(/hopes) to achieve <u>some</u> results through routine "running of the mill"/occasional spurs of exhortations/threats. (many times received from above).</p> <p>3. No diagnostic review of performance done.</p> <p>4. HOM's <u>initiative</u> frees him from assuming responsibility for performance improvement.</p>

Table 5Sharing of managerial tasks
Under MBO

<u>Head Office Manager(HOM)</u>	<u>Field Manager(FM)</u>
<ol style="list-style-type: none"> 1. Influences FM's goals(to be in line with needed corporate goals) 2. Seeks/demands that FM prepare detailed plans. Plays advisory role here. 3. Helps FM identify causes for variance -coaches FM in learning from mistakes 4. Ruthlessly demands that FM deliver the results. 	<ol style="list-style-type: none"> 1. Actively participates in goal-setting and commits to goals. 2. Prepares detailed plans 3. Steers implementation without being "watched" 4. Takes initiative in identifying causes for variance, as well as remedial actions.